



Deferring and Rescheduling Appropriate Visits, Procedures, Surgeries, and Tests During COVID-19

Date: Updated 3/19/2020V3

At this time, clinic visits, medical procedures, surgeries, radiology and laboratory testing should be deferred or rescheduled to the extent that it can be done safely for a given patient. Clinic visits should be converted to phone visits, when an in-person visit is not essential

Purpose:

Reduce the number of face-to-face interactions with patients:

- to minimize infection exposure risk to staff and patients
- to preserve inpatient bed, procedure unit, operating room, and radiology and laboratory capacity
- to preserve limited resources such blood and blood products, and personal protective equipment
- minimize staff shortages that may occur as result of COVID-19 and manage potential reduction in health care work force
- allow for redeploying physician and nursing staff to other essential functions for responding to COVID-19

Definition: Face-to-face patient health care encounters for conditions that do not require definitive management within the next 2 months or will not result in delay of care leading to patient harm (e.g., delay diagnosis or definitive management of treatable cancer).

Plan:

To determine if face-to-face patient health care encounters should be deferred or rescheduled, immediately review for the following criteria:

- I) Clinical condition that cannot be temporized more than 2 months or would not result in irreparable patient harm: to the extent feasible, these cases/procedures already scheduled for next week should continue as planned.
- II) Chronic stable conditions or acute conditions for which more rapid management would not cause irreparable harm should be rescheduled
- III) For Outpatient surgery/procedures:
 - a.If scheduled case meets condition I, it can proceed at Chair's discretion
 - b.If scheduled case meets condition II, it should be rescheduled
- IV) Patients should not have their appointments cancelled without being given appropriate follow-up. The follow-up can be a phone visit and/or a rescheduled in-person visit.
- V) If providing appropriate follow up at the time of cancellation is not possible, the patient should be added to a tracking list, maintained by the facility that canceled their appointment, in order to reschedule their care when there is the ability to do so.

Vaccines for young children:

Patients should continue to receive routine vaccinations whenever possible to at least to 1 year of age. Steps should be taken to limit the exposures to other patients whenever possible.